

INSD Pro Se Employment Discrimination Complaint 10/21 (adapted from AO Pro Se 7 (Rev. 12/16) Complaint for Employment Discrimination)

# UNITED STATES DISTRICT COURT

for the

Southern District of Indiana

**1 : 22 -cv- 1103 SEB -TAB**

Case No. \_\_\_\_\_

(to be filled in by the Clerk's Office)

Sharon Anne Ortega

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Speedway LLC

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Jury Trial: (check one) ☐ Yes ☐ No

**FILED**

**MAY 27 2022**

U.S. CLERK'S OFFICE  
INDIANAPOLIS, INDIANA

## COMPLAINT FOR EMPLOYMENT DISCRIMINATION

### NOTICE

Federal Rule of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date, the full name of a person known to be a minor, or a complete financial account number. A filing may include *only*: the last four digits of a social security number, the year of an individual's birth, a minor's initials, and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievances, witness statements, evidence, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

**I. Basis for Jurisdiction**

This action is brought for discrimination in employment pursuant to (check all that apply):

☐ Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

*(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*

☒ Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

*(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)*

☐ Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

*(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*

☐ Other federal law (specify the federal law):

☐ Relevant state law (specify, if known):

☐ Relevant city or county law (specify, if known):

**II. The Parties to This Complaint****A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Sharon Anne Ortega</u>
Street Address	<u>3790 W. 380 S.</u>
City and County	<u>New Palestine</u>
State and Zip Code	<u>Indiana 46163</u>
Telephone Number	<u>317-965-4643</u>
E-mail Address	<u>granmy3790@yahoo.com</u>

**B. The Defendant(s)**

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, a corporation, or another entity. For an individual defendant, include the person's job or title (*if known*). Attach additional pages if needed.

**Defendant No. 1**

Name

Speedway LLC

Job or Title (*if known*)

CORPORATION

Street Address

PO Box 1500

City and County

Springfield, OHIO Clark County

State and Zip Code

OHIO 45501

Telephone Number

937 864 3001

E-mail Address (*if known*)**Defendant No. 2**

Name

Job or Title (*if known*)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (*if known*)**Defendant No. 3**

Name

Job or Title (*if known*)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (*if known*)

**C. Place of Employment**

The address at which I sought employment or was employed by the defendant(s) is

Name Speedway  
 Street Address 5058 W. HWY 52  
 City and County New Palestine  
 State and Zip Code IND. 46163  
 Telephone Number 317-861-4325

**III. Statement of Claim**

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. The discriminatory conduct of which I complain in this action includes *(check all that apply)*:

- ☐ Failure to hire me.  
☐ Termination of my employment.  
☐ Failure to promote me.  
☐ Failure to accommodate my disability.  
☒ Unequal terms and conditions of my employment.  
☒ Retaliation.  
☐ Other acts *(specify)*: \_\_\_\_\_

*(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)*

B. It is my best recollection that the alleged discriminatory acts occurred on date(s)

4-16-2021 1-29-2021

C. I believe that defendant(s) *(check one)*:

- ☒ is/are still committing these acts against me.  
☐ is/are not still committing these acts against me.

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## D. Defendant(s) discriminated against me based on my (check all that apply and explain):

- ☐ race \_\_\_\_\_  
☐ color \_\_\_\_\_  
☐ gender/sex \_\_\_\_\_  
☐ religion \_\_\_\_\_  
☐ national origin \_\_\_\_\_  
☒ age (year of birth) 62 (only when asserting a claim of age discrimination.)  
☐ disability or perceived disability (specify disability) \_\_\_\_\_

## E. The facts of my case are as follows. Attach additional pages if needed.

Had a meeting with my District manager Chirs Blevins and my Manager Lisa Doran in the meeting she asked my age I replied 62 she said, "don't you think you should let someone younger to take over like Stevie" I said, "no" I wanted to stay in my position my D.M. Chirs witness her asking my age I told him I am reporting age discrimination. Soon after that I had learned of his being let go FROM Speedway, so I filed with the EEOC. A meeting took place on 4/16/2022 they asked me to move to another store and go down to 40 hrs/wk. instead of 50. I then went outside. ~~I went on FMLA~~ I then filed FMLA. I found out that Stevie moved in my position then to manager in the store.

(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)



**IV. Exhaustion of Federal Administrative Remedies**

- A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on (date)

2-27-2022

- B. The Equal Employment Opportunity Commission (check one):

☐

has not issued a Notice of Right to Sue letter.

☒

issued a Notice of Right to Sue letter, which I received on (date) 2-27-2022.

(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)

- C. Only litigants alleging age discrimination must answer this question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct (check one):

☒

60 days or more have elapsed.

☐

60 days or more have not elapsed.

**V. Relief**

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

\$150,000 and any court cost and fee

**VI. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

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I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 5/27/2022

Signature of Plaintiff

Sharon Ortega

Printed Name of Plaintiff

Sharon Ortega

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Date of signing: 5/27/2022

Signature of Plaintiff

Sharon Ortega

Printed Name of Plaintiff

Sharon Ortega

Print

Save As...

Add Attachment

Reset